PTO/SB/31 (01-08)

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		1020		
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"Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313- 1450* [37 CFR 1.8(a)]	Application Number 09/899,435		Filed July 5, 2001	
on	For TELECOMMUNICATION NETWORK, METHOD			
Signature				
Typed or printed	Art Unit		Examiner P.J. Chea	
10 - 2153		P.G. Chea		
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.				
The state of the s				
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))			540.00	
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$				
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The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.				
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X A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.				
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I am the		1		
applicant/inventor.	A	261		
	-/-	Sign	natissa	
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.		Kevin R. Sp	oi √ak ⊃	
(Form PTO/SB/96)	Typed or printed name			
x attorney or agent of record.		202-955-700	17	
Registration number				
attorney or agent acting under 37 CFR 1.34.	February 6, 2009			
Registration number if acting under 37 CFR 1.34.		-		
Date				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
Submit multiple forms it more than one algitatore is required, see Delow .				
"Total of . forms are submitted.		*		

This collection of information is required by 37 CFR 4.13. The information is required to obtain or retain a bonetif by the public which is it is fit (and by the USFN) to process) as application. Confidentiality is generated by \$8.15.0. 122 and \$7.CFR 11.1.1.1.1.4 and 41.6. This collection is administed to bate of complete, including gathering, proparing, and submitting the completed application form to the USFNO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete its form and/or suppositions for reducing this burden, should be sent to the Chile VI.S. Papartment of Commerce, P.O. Box 1459, Absandria, VA 2231-3450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissions for Patients, P.O. Box 1459, Absandria, VA 2231-3450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissions for Patients, P.O. Box 1459, Absandria, VA 2231-3450.